



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
 Division of Water Resources
 6th Floor Annex, L&C Tower, 401 Church Street, Nashville, Tennessee 37243
 1-888-891-8332 (TDEC)

MRG
JAL
File: Big Fiery Gizzard WTP Expansion - 2014 (Grundy)

Notice of Intent (NOI) for General NPDES Permit for Stormwater Discharges from Construction Activities (TNR100000)

Site or Project Name: Big Fiery Gizzard Water Treatment Plant Expansion		Existing NPDES Tracking Number: TNR	
Street Address or Location: 13815 US Highway 41		Start date: October 27, 2014	
Site Activity Description: Construct bldg pad and ground storage tanks.		Estimated end date: October 26, 2015	
County(ies): Grundy		Latitude (dd.dddd): 35.25874	
MS4 Jurisdiction: N/A		Longitude (dd.dddd): -85.755569	
		Acres Disturbed: 1.25	
		Total Acres: 3.25	
Does a topographic map show dotted or solid blue lines <input checked="" type="checkbox"/> and/or wetlands <input type="checkbox"/> on or adjacent to the construction site? If wetlands are located on-site and may be impacted, attach wetlands delineation report. If an Aquatic Resource Alteration Permit has been obtained for this site, what is the permit number? ARAP permit No.: NRS 08.145			
Receiving waters: Big Fiery Gizzard Creek			
Attach the SWPPP with the NOI <input checked="" type="checkbox"/> SWPPP Attached		Attach a site location map <input checked="" type="checkbox"/> Map Attached	
Site Owner/Developer Entity (Primary Permittee): (person, company, or legal entity that has operational or design control over construction plans and specifications): Town of Tracy City, Tennessee			
Site Owner/Developer Signatory (V.P. level/higher - signs certification below): (individual responsible for site):		Signatory's Title or Position (V.P. level/higher - signs certification below):	
Mailing Address: P. O. Box 277		City: Tracy City	State: TN Zip: 37387
Phone: () 931.592.6213	Fax: () 592-6218	E-mail: tracycity@blomand.net	
Optional Contact: Tommy McFarland (TC Public Utilities)		Title or Position: TCPU General Manager	
Mailing Address: P. O. Box 28		City: Tracy City	State: TN Zip: 37387
Phone: () 931.592.2787	Fax: ()	E-mail: macmgr@blomand.net	
Owner or Developer Certification (must be signed by president, vice-president or equivalent, or ranking elected official) (Primary Permittee)			
I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.			
Owner or Developer Name; (print or type) Larry Phipps, Mayor		Signature: <i>Larry Phipps</i>	Date: 10-21-14
Contractor(s) Certification (must be signed by president, vice-president or equivalent, or ranking elected official) (Secondary Permittee)			
I certify under penalty of law that I have reviewed this document, any attachments, and the SWPPP referenced above. Based on my inquiry of the construction site owner/developer identified above and/or my inquiry of the person directly responsible for assembling this NOI and SWPPP, I believe the information submitted is accurate. I am aware that this NOI, if approved, makes the above-described construction activity subject to NPDES permit number TNR100000, and that certain of my activities on-site are thereby regulated.			
Contractor company name (print or type): W & O Construction Company, Inc.			
Contractor signatory (print/type): (V.P. level or higher) Tim Huddleston, V.P.		Signature: <i>Tim Huddleston</i>	Date: 10-22-14
Mailing Address: 150 Construction Drive		City: Livingston	State: TN Zip: 38544
Phone: () 931-403-1000	Fax: () 3588	E-mail: thuddleston@wocc.com	
Other Contractor company name (print or type):			
Other Contractor signatory (print/type): (V.P. level or higher)		Signature:	Date:
Mailing Address:		City:	State: Zip:
Phone: ()	Fax: ()	E-mail:	

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Received Date:	Reviewer:	Field Office:	Permit Number TNR 112530	Exceptional TN Water:
Fee(s):	T & E Aquatic Flora and Fauna:	Impaired Receiving Stream:	Notice of Coverage Date:	